

中文題目：肝癌以沙門氏桿菌菌血症及肝膿瘍為初次表現

英文題目：Hepatocellular carcinoma complicated with Salmonellosis and liver abscess

作者：張庭遠<sup>1</sup>，戴嘉言<sup>1</sup>

服務單位：<sup>1</sup> 高醫肝膽內科

We report a rare case of hepatocellular carcinoma (HCC) complicated with liver abscess by the bacteremia of group D1, non-typhi *Salmonella* infection.

A 65-year-old man, who with a past history of hypertension, and presented with high grade fever, a palpable mass over right upper quadrant several days before visiting our emergency room. He was a non-smoker and did not consume alcohol. The initial biochemistry analysis revealed leukocytosis, elevated c-reactive protein, mild elevated liver enzymes and alpha-fetal protein (AFP) level (30.1 ng/mL) and normal renal function,. Abdominal magnetic resonance image (MRI) with dynamic phases was performed showing a liver mass (Panels A-C) with solid part (red arrows) and complicated with abscess (white arrows) and gas formation (blue arrow heads) over the left lobe of the liver. The pattern of gradual enhancement in dynamic phases was not typical images for diagnosis of HCC (red arrow). The Diffusion weighted sequence (DWI) revealed hyperintense and restricted diffusion which implicated a malignant tumor (Panel D). Coronal view of T2 (Panel E) weighted MRI also showed a liver abscess (white arrows) with gas formation (blue arrow heads). A catheter was inserted with abscess drained out. The blood culture and abscess culture both revealed *Salmonella* serogroup D1 of non-typhi. He received hepatectomy of left lobe liver and the pathology confirmed HCC (Panel F, red arrow) with necrotic tissue (Panel F, white arrow). Newly diagnosed diabetes mellitus (DM) (HbA1C: 8.3%) and hepatitis B virus (HBV) infection was noted. AFP decreased from 30.1 to 6.2 ng/mL after hepatectomy of left lobe liver. He ate raw fish several days ago before fever.